

Venue: GIZA
 23rd August 2007
 1215-1415 hr

Lunch Symposium 3: Update in cardiac pathology

LS3-1. Pathology of the cardiomyopathies

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Cardiomyopathies are a diagnostic challenge, clinically and morphologically. They represent the most common cause of sudden unexpected death in young people and are often an irreversible form of heart muscle disease with a dismal outcome. The objective of this presentation is to review the major morphologic features of the common cardiomyopathies. The major cardiomyopathies include the dilated cardiomyopathy, hypertrophic cardiomyopathy and the inflammatory / infiltrative cardiomyopathies. For our clinical colleagues, ischemic cardiomyopathy is by far the most common one (N.B.: most pathologists do not agree with this terminology). The incidence of the cardiomyopathies seems to vary from region to region and even more from continent to continent. In North America, the dilated and hypertrophic form is the most common. In parts of South America, Chagas' disease and the Chagas' disease associated cardiomyopathy is likely much more common than the others. In East, Central and West Africa, different cardiomyopathies, most of which are likely infectious in etiology seem to be more prevalent. Unfortunately, relatively little is known about these. Some newer cardiomyopathies, associated with drugs and new chemotherapeutic agents have been reported. This review will concentrate on myocarditis, dilated cardiomyopathy, and hypertrophic cardiomyopathy.

Objectives:

1. Review the morphological features of the myocarditides
2. Review dilated cardiomyopathies
3. Review the morphological features of hypertrophic cardiomyopathy

LS3-2. The autopsy approach to sudden cardiac death

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In most civilized nations, the sudden and unexpected death of an individual is subject to an investigation. Primarily, it is to exclude foul play, but it also serves to identify any important public health issues. Sadly, that is often where the investigation ends. Recent improvements in our knowledge have enabled us to appreciate and understand more the many other possible causes for a sudden death. Here, we will however concentrate on those sudden deaths that are believed to be of a cardiac cause. The approach to an autopsy of a sudden death is really no different from that of an approach to the diagnosis of a "live" patient. It starts with a clinical history before a thorough examination and concluding with appropriate investigations. It does not end here either, follow-up work may be required. Questions of organ retention, genetic tests and counselling will also be addressed as well as some of the common cardiac conditions associated with sudden cardiac deaths.

LS3-3. An approach to interpretation of endomyocardial biopsies

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The endomyocardial biopsy (EMB) is the gold standard for investigation and diagnosis of many primary and secondary cardiac. It is also the standard mode for follow up of post-transplant patients and in fact is the most common reason for endomyocardial biopsy, at most major academic cardiac centers. Performed through the percutaneous, transvenous route, it allows tissue biopsies from the interventricular septum (right side) to be procured. Widespread use of EMB followed the development of heart transplantation, for the evaluation of allograft rejection. It has also been extremely useful in the diagnosis of many clinical conditions affecting the heart. These include the cardiomyopathies, myocarditis, infiltrative diseases, arrhythmias of unknown etiology and at times, heart failure of unknown cause. The procedure has also been used as a research tool, for the evaluation of the natural history of certain diseases and for the detection of the cardiotoxicity of some medications. This review will present an approach to the evaluation of the endomyocardial biopsy. It will be of help for those who are asked to interpret endomyocardial biopsies, occasionally. The recommendation is that the biopsy be evaluated systematically, encompassing analysis of the endocardium, myocardium, interstitium, intermural vessels and offer a diagnosis after evaluation of the patient's clinical history. Amongst the major benefits of the biopsy is its ability to exclude certain conditions and make patient management easier, and provide much needed relief to patients.

Objectives:

1. Review the contemporary indications for EMB.
2. Provide an approach to the EMB
3. Briefly mention the morphological features of some cardiomyopathies.